

## **REQUEST FOR REVIEW**

MARYSVILLE

Community Development Department • 501 Delta Avenue • Marysville, WA 98270

Office Hours: Mon - Fri 8:00 AM - 4:30 PM • Phone: (360) 363-8000

	Р	ROJECT IN	FORMATION	ON						
File Number	PA23015		Date Sent		7.1	11.23 Please Return		7.26.23		
Project Title	MSR Tuscany Townhomes		Related F Number(s		PreA22035					
Project Description	Thirty-seven unit townhomes development, utilizing Residential Density Incentives to achieve bonus units, and associated improvements. Access proposed from 84 <sup>th</sup> Street.									
BACKGROUND SUMMARY										
Applicant	MSR Communities 5, LLC									
Location	4407 84 <sup>th</sup> Street NE	APNs	300	052100105200						
Acreage	2.76 acres (120,226 SF)		Section	21	-	Township	30	Range	05	
Comprehensive Plan	Multifamily Low Zoning	R-12	Shoreline	Envi	ironi	ment	N/A			
REVIEWING AGENCIES										
Marysville	Local Agencies & Districts	State 8	& Federal	al County				Other		
Building Parks Police PW - Development Services PW - Engineering PW - Operations PW - Solid Waste PW - Streets PW - Traffic Eng. PW - Water Res. PW - WWTP	Arlington Airport Arlington (city) Comcast Community Transit Everett (city) Lake Stevens (city) Lake Stevens SD 4 Alexamond SD 306 Marysville Fire District Marysville SD 25 PUD No. 1 (electric) Ziply	Engine BNSF DAHP DNR DOE (F	Bellevue) Floodplain) Register) Shorelands)		Health District Planning Public Works - Land Development			Olympic Pipeline Puget Sound Energy Stillaguamish Tribe Tulalip Tribes		
PROJECT MANAGER										
Name Amy Hess Title Senior Planner Phone 360.363.8215 E-mail ahess@marysvillewa.gov										
The City of Marysville Community Development Department is reviewing this application and encourages other affected agencies, departments, community groups and municipalities to respond. Your comments will assist the City's evaluation of this application. Furthermore, you will become a Party of Record to this case if you submit a response with your name and address. We highly recommend that you send your comments on letterhead. Without a full name and address, you will not be considered a Party of Record. You may e-mail, fax or send via regular mail your comments to this project manager listed above.  If you have no comments, please check the box below, sign and return this form to the project manager.										
☐ ATTACHED	Signature:					Agency:				